

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/597647

FILING DATE

05 SEP 2008

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
	1	/	/			
2	/		/			
3	2		/			
4	1		/			
5	0		/			
6	0		/			
7	0		/			
8	0		/			
9	0		/			
10	/		/			
11	/		/			
12	2		/			
13	1		/			
14	0		/			
15	0		/			
16	0		/			
17	0		/			
18	0		/			
19	/		/			
20	/		/			
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						
36						
37						
38						
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	4	↓	4	↓		↓
TOTAL DEP.	18	←	16	←		←
TOTAL CLAIMS	22		20			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
	51					
52						
53						
54						
55						
56						
57						
58						
59						
60						
61						
62						
63						
64						
65						
66						
67						
68						
69						
70						
71						
72						
73						
74						
75						
76						
77						
78						
79						
80						
81						
82						
83						
84						
85						
86						
87						
88						
89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.			↓		↓	
TOTAL DEP.			←		←	
TOTAL CLAIMS						